

**IH-6**

(Rev. 1998)  
Indiana Department of  
State Revenue  
SF # 48835

# Indiana Inheritance Tax Return

|   |  |                               |                    |  |  |
|---|--|-------------------------------|--------------------|--|--|
| <b>1</b> Decedent's first name and middle initial   |  | <b>2</b> Decedent's last name |                    | <b>3</b> Decedent's Social Security Number |  |
| <b>4</b> Resident county at date of death   |  | <b>5</b> Date of death        |                    | <b>6</b> Name of court                     |  |
|   |  |                               |                    | <b>7</b> Court case number                 |  |
| <b>8</b> Name of person filing return   |  |                               | <b>9</b> Address   |  |  |
| <b>10</b> If decedent died intestate, check here <input type="checkbox"/> <b>11</b> If decedent had a safe deposit box, check here <input type="checkbox"/><br>If decedent died testate attach a copy of the will |  |                               | and state location |  |  |
| <b>12</b> A Federal Estate Tax Return 706 is <input type="checkbox"/> is not <input type="checkbox"/> required. If 706 is filed, copy must be furnished.  |  |                               |                    |  |  |

## SUMMARY

| Schedule  | Value at Date of Death |
|---|------------------------|
| A Real Estate .....   | \$ .....               |
| B Cash, Deposits, Mortgages, Notes, Stocks and Bonds, Life Insurance Payable to Estate..... | \$ .....               |
| C Other Miscellaneous Property Transferred by Will or Intestate Law.....                    | \$ .....               |
| D Annuities, Pensions, Retirement Plans and Other Death Benefits .....                      | \$ .....               |
| E Transfers Other Than by Will or Intestate Law .....                                       | \$ .....               |
| <b>Gross Estate</b> .....   | <b>\$</b> .....        |
| F Deductions .....  | <b>\$</b> .....        |
| <b>Taxable Estate</b> .....   | <b>\$</b> .....        |
| <b>Inheritance Tax Due</b> .....  | <b>\$</b> .....        |

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules, statements, and instruments, and to the best of my knowledge and belief, it is true, correct and complete.

\_\_\_\_\_  
Signature of person filing return

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of lawyer

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone Number

## INHERITANCE TAX COMPUTATION

|                                 |                                |                   |           | Name of Decedent |  |
|---------------------------------|--------------------------------|-------------------|-----------|------------------|--|
| Name and Address of Beneficiary | Relationship and Date of Birth | Value of Interest | Exemption | Amount of Tax    |  |
| 1.                              |                                |                   |           |                  |  |
|                                 |                                |                   | Total Tax |                  |  |

[illegible]

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NAME OF DECEDENT

**SCHEDULE B**  
**CASH, DEPOSITS, MORTGAGES, NOTES, STOCKS AND BONDS,**  
**LIFE INSURANCE PAYABLE TO ESTATE**  
**(Jointly owned property should be reported on Schedule E)**

| Description            | Fair Market Value |
|------------------------|-------------------|
| 1.                     |                   |
| Total Schedule B ..... |                   |

NAME OF DECEDENT

**SCHEDULE C**  
**OTHER MISCELLANEOUS PROPERTY**  
**TRANSFERRED BY WILL OR INTESTATE LAW**  
**(Jointly owned property should be reported on Schedule E)**

| Description                                     | Fair Market Value |
|---|-------------------|
| <div>1.</div> <div>Total Schedule C .....</div> |                   |

[illegible]

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NAME OF DECEDENT

**SCHEDULE E**  
**TRANSFERS OTHER THAN BY WILL OR INTESTATE LAW**  
**(TRUSTS, POWERS OF APPOINTMENT, TRANSFERS IN CONTEMPLATION OF DEATH OR TO TAKE EFFECT AT**  
**OR AFTER DEATH, AND JOINT TENANCIES WITH RIGHTS OF SURVIVORSHIP)**

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| Description            | Fair Market Value |
|------------------------|-------------------|
| 1.                     |                   |
| Total Schedule E ..... |                   |

NAME OF DECEDENT

SCHEDULE F - DEDUCTIONS

| Nature of Description of Claim, Debt or Expense | Amount of Deduction |
|---|---------------------|
| 1.  |                     |
| Total Schedule F .....                          |                     |